10/613610

, , ,									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003											10673610				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			. 9				1	RATE		FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		375.00	OB	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			(^{Oi} minus 20=		• ¢			X\$ 9=			OR	X\$18=			
INDEPENDENT CLAIMS					* /			X42=			OR	X84=	84		
ΜU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=			OR	+280=	0 /		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	4		OR		1 /24			
CLAIMS AS AMENDED - PART II								OTHER THAN							
1	(Column 1)				(Column 2) (Column 3)			SMALL ENTITY			OR	SMALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	- 1	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	· 19	Minus	** /	D	= /		X\$ 9=	-		OR	X\$18=			
	Independent	* ¥	Minus			= 4		X42=	1		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							' [+140=	-		OR	+280=	-		
17,13,19.							L	TOTA			OR	TOTAL ADDIT, FEE			
_		(Column 1)		(Colun		(Column 3)			ست جا-		-		- · · · · · ·		
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=			
	Independent	NTATION OF MI	Minus	***	CLAIM	-		X42=			OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=	:		OR	+280=			
									AL L		OR	TOTAL ADDIT. FEE			
_		(Column 1)		(Colun		(Column 3)					_				
AMENDMENT C		REMAINING AFTER AMENDMENT	·	NUME PREVIO	BER	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	##		=	X\$ 9				OR	X\$18=			
	Independent	*	Minus	***		=	╽┟	X42=	\dagger			X84=			
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╿┞		十		OR				
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **OF THIS SPACE IS LESS THAN 3, enter "3." **OF THIS PROVIDENT PROVIDENCE IN THIS SPACE IS LESS THAN 3, enter "3." **OF THIS Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															
	PTO-875 (Pag. 12		O FOR (1018) or					nd in the							